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Special Instructions to Fili	ing Officer:	
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DEPARTHENT OF STATE

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ION SERVICE COMPANY.
ACCOUNT NO. : 12000000195
REFERENCE : 752718 7100061
AUTHORIZATION: Spelle de Mar
COST LIMIT : \$ 125.00
ORDER DATE: August 5, 2013
ORDER TIME : 9:36 AM
ORDER NO. : 752718-005
CUSTOMER NO: 7100061
FOREIGN FILINGS
NAME: DISCOVERY SENIOR LIVING HOLDINGS LLC
XXXX QUALIFICATION (TYPE: LL)
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY  XX PLAIN STAMPED COPY  CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Susie Knight EXT# 52956
EXAMINER:

NIE O 6 INS

### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: DISCOVERY SENIOR LIVING HOLDINGS LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the writter consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Elabilism Company," "L.L.C," "LLC.") 3, 46-3248381 2. DELAWARE (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) PERPETUAL ↓ JUNE 21, 2013 (Duration: Year limited liability company will cease to (Date of Organization) exist or "perpetual") (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 7 3301 BONITA BEACH ROAD, SUITE 208 BONITA SPRINGS, FL 34134 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here X 9. The name and usual business addresses of the managing members or managers are as follows: Richard J., Hutchinson, 3301 Bonita Beach Rd., Suite 208, Bonita Springs, FL 34134 Thomas J. Harrison, 3301 Bonita Beach Rd., Suite 208, Bonita Springs, FL 34134 Al Hoffman, Jr., 301 Bonita Beach Rd., Suite 208, Bonita Springs, FL 34134 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: Any and all lawful business for which limited liability companies may be organized under DE and FL law Signature of a member or an authorized representative of a member. (In accordance with section 608,408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true I am aware that any false information submitted in a

document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

JOY S. GOLDMAN

Typed or printed name of signee

#### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

If unavailable, the alternate to be used in the state of Florida is:				
2. The name	e and the Florida street addre	ess of the registered agent and office are:		
	Corporation Service Com	pany		-
		(Name)	11 m 6	<u> </u>
	1201 Hays Street			₹
	Florida Street Address (P.O. Box NOT ACCEPTABLE)			
	Tallahassee	32301 FL		
		City/State/Zip		
liability comp registered ag statutes relat	pany at the place designated gent and agree to act in this c ing to the proper and comple	nd to accept service of process for the above st in this certificate, I hereby accept the appointn apacity. I further agree to comply with the pro ete performance of my duties, and I am familian egistered agent as provided for in Chapter 608	nent as ovisions of all with and	

Corporation Service C

(Signature) Dawn Frantz, Asst. Secretary

> \$ 100.00 Filing Fee for Application Designation of Registered Agent \$ 25.00 **Certified Copy (optional)** \$ 30.00 5.00 Certificate of Status (optional)

## Delaware

PAGE 1

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "DISCOVERY SENIOR LIVING HOLDINGS

LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND

IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE

RECORDS OF THIS OFFICE SHOW, AS OF THE FIFTH DAY OF AUGUST, A.D.

2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DISCOVERY SENIOR LIVING HOLDINGS LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF JUNE, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

106-6 RH 1:40

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130955357

AUTHENTY CATION: 0640543

DATE: 08-05-13

You may verify this certificate online at corp.delaware.gov/authver.shtml